

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13429

FILED
Apr 21, 2011
Secretary of State

Entity Name: LEAGUE OF WOMEN VOTERS OF COLLIER COUNTY EDUCATION FUND, INC.

Current Principal Place of Business:

409 ARBOR LAKE DRIVE
NAPLES, FL 34110 US

New Principal Place of Business:

178 OAKWOOD COURT
NAPLES, FL 34110 US

Current Mailing Address:

P.O. BOX 9883
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 59-2659558 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JODER, MARJORIE J
409 ARBOR LAKE DR
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

STEFFAN, VIOLA W
178 OAKWOOD COURT
NAPLES, FL 34110 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: VIOLA W. STEFFAN

04/21/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: 1VP
Name: FLETCHER, JOYCE
Address: 2148 PAGET CIRCLE
City-St-Zip: NAPLES, FL 34112

Title: TT
Name: VIOLA, STEFFAN
Address: 178 OAKWOOD COURT
City-St-Zip: NAPLES, FL 34110

Title: S
Name: SUDDETH, DONNA
Address: 9207 VANDERBILT DRIVE, VILLA 1
City-St-Zip: NAPLES, FL 34108

Title: 2VP
Name: MCCANN, TOM
Address: 709 PITCH APPLE LANE
City-St-Zip: NAPLES, FL 34108

Title: P
Name: GALTON, LYDIA
Address: 442 ROSEMEADE LANE
City-St-Zip: NAPLES, FL 34105

Title: D
Name: SCHMELZ, BERNICE
Address: 5575 DOGWOOD WAY
City-St-Zip: NAPLES, FL 34116

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VIOLA W. STEFFAN

TT

04/21/2011

Electronic Signature of Signing Officer or Director

Date